IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

pplicant:

Priv.-Doz. Dr. med. Hans

Examiner:

David M. Shay

érial No.:

Michael Ockenfels 10/689463

Group Art Unit:

3735

Filed:

October 20, 2003

Docket No.:

01840.0001-US-01

Title:

LASER THERAPY DEVICE FOR THE TREATMENT OF SKIN

DISEASES

CERTIFICATE UNDER 37 C.F.R. 1.8: The undersigned hereby certifies that this Transmittal Letter and the paper, as described herein, are being deposited in the United States Postal Service, as first class mail, with sufficient postage, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 26, 2006.

Michele A. Read

Name

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This Transmittal Sheet (1 page)

Fee Transmittal for FY 2006 (PTO/SB/17) (1 page)

Petition for Extension of Time Under 37 C.F.R. §1,136(a) (1 page)

Amendment and Response Under 37 C.F.R. §1.116 (9 pages)

Check in the amount of \$60.00 for extension fees (1 item)

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Authorization is hereby given to charge any additional fees or credit any overpayments that may be deemed necessary to Deposit Account Number 50-1038.

Respectfully submitted,

Altera Law Group, L

Customer No. 22865

Date: June 26, 2006

By:

Michael B. Lasky

Reg. No. 29,555

MBL/mar

PTO/SB/17 (01-06) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known es pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). Application Number 10/689,463 FEE TRANSMIT Filing Date October 20, 2003 For FY 2006 First Named Inventor Hans Michael Ockenfels **Examiner Name** David M. Shay Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3735 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 01840.0001-US-01 METHOD OF PAYMENT (check all that apply) Credit Card Money Order None L Other (please identify): ✓ Deposit Account Deposit Account Number: <u>50-1038</u> Deposit Account Name: Altera Law Group, LLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 200 Provisional 100 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims 19 - 20 or HP = 0 <u>25</u> Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) _ - 3 or HP = 0 100 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) (round up to a whole number) x / 50 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specific ation, no small entity discount) Other (e.g., late filing for response within the first month 60

SUBMITTED BY	// // / / / / / / / / / / / / / / / / /		
Signature	//////////////////////////////////////	Registration No. (Attorney/Agent) 29,555	Telephone (952) 253-4106
Name (Print/Type	Michael B. Lasky		Date June 26, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.